

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of :

Louis Odenwald

RECEIVED  
CENTRAL FAX CENTERSerial No. :

10/083,214

Group Art Unit : 2182

MAY 10 2004

Filed :

February 26, 2002

Examiner :For :

Integrated Target Masking

Atty Docket : / 01-922

OFFICIAL

STATUS REQUEST

Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Applicants request a status of the above referenced application. Please mail the status notification to the address stated below.

Respectfully submitted,

  
Sandeep Jaggi, Ph: [+1] 408-433-7472

Reg. No. 43,331

LSI Logic Corporation  
1621 Barber Lane, MS D-106  
Milipitas, CA 95035  
[+1] 408-433-7472Date: 4/10/04



# FAX

RECEIVED  
CENTRAL FAX CENTER

MAY 10 2004

LSI Logic Corporation  
Intellectual Property  
Corporate Legal Department  
MS D-106  
1551 McCarthy Blvd.  
Milpitas, CA 95035

OFFICIAL

Date May 10, 2004

Number of pages including cover sheet 3

**To: US PTO, Mail Stop Status**

**Request**

**TC 2182**

**Fax No. (703) 872-9306**

**Phone No.**

**CC:**

**From: Mark Salvatore**

**Intellectual Property Paralegal**

**Telephone No. (408) 433-7472**

**Fax No. (408) 433-7460**

**REMARKS:**

Urgent  For your review  Reply ASAP  Please comment

**Application Number:** 10/083,214  
**Filing date:** February 26, 2002  
**First named inventor:** Odenwald, Louis  
**Attorney docket number:** 01-922

Transmitted herewith for filing via facsimile:

- Transmittal Form, PTO/SB/21
- Status Request

Please contact us at (408) 433-7191 if you do not receive all pages indicated above or experience any difficulty in receiving this facsimile.

This Facsimile is intended only for the use of the addressee and, if the addressee is a client or their agent, contains privileged and confidential information. If you are not the recipient of this facsimile, you have received this facsimile inadvertently and in error. Any review, dissemination, distribution, or copying is strictly prohibited. If you received this facsimile in error, please notify us by telephone and return the facsimile to us.

Please type a plus sign (+) inside this box → 

PTO/SB/21 (12/97)  
Approved for use through 9/30/2000, OMB 0651-0031  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

|  |   |                        |                   |
|--|---|------------------------|-------------------|
| <b>TRANSMITTAL<br/>FORM</b><br><i>(to be used for all correspondence after initial filing)</i> |   | Application Number     | 10/083,214        |
|  |   | Filing Date            | February-26, 2002 |
|  |   | First Named Inventor   | Louis Odenwald    |
|  |   | Group Art Unit         | 2182              |
|  |   | Examiner Name          |                   |
| Total number of pages in this submission   | 2 | Attorney Docket Number | 01-922            |

**ENCLOSURES (check all that apply)**

|  |   |  |
|--|---|--|
| <input type="checkbox"/> Fee Transmittal Form                                | <input type="checkbox"/> Assignment Papers  | <input type="checkbox"/> After Allowance Communication to Group                            |
| <input type="checkbox"/> Fee Attached  | <input type="checkbox"/> Drawing(s)   | <input type="checkbox"/> Appeal Communication to Board of Appeals and                      |
| <input type="checkbox"/> Amendment/Response                                  | <input type="checkbox"/> Licensing-related Paper  | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final   | <input type="checkbox"/> Petition Routing Slip (PTO/SB/59) and Accompanying Petition    | <input type="checkbox"/> Proprietary Information   |
| <input type="checkbox"/> Affidavits(s)/declaration(s)                        | <input type="checkbox"/> To Convert a Provisional Application                           | <input checked="" type="checkbox"/> Status Letter  |
| <input type="checkbox"/> Extension of time request                           | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Additional Enclosure(s) (please identify below):                  |
| <input type="checkbox"/> Express Abandonment Request                         | <input type="checkbox"/> Terminal Disclaimer  |  |
| <input type="checkbox"/> Information Disclosure Statement                    | <input type="checkbox"/> Small Entity Statement   |  |
| <input type="checkbox"/> Certified Copy of Priority Document(s)              | <input type="checkbox"/> Request for Refund   |  |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application   |   |  |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 |   |  |
| Remarks  |   |  |

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

|                 |   |  |
|-----------------|---|--|
| Individual Name | Sandeep Jaggi, Reg. No. 43,331, Phone: [+1] 408-954-4923                            |  |
| Signature       |  |  |
| Date            | 4-20-04   |  |

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

|                       |   |   |
|-----------------------|---|---|
| Typed or printed name | Mark Salvatore, Phone: [+1] 408-433-7472  |   |
| Signature             |  | Date <input type="text" value="5-10-04"/> |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.